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Members of the Montana House Judiciary Committee:

I am a registered patient in Montana's medical marijuana program. I also am a registered caregiver who grows medical marijuana for five other patients around the state. I strongly support House Bill 311, and write to explain how this bill will perfect the program that Montana voters approved overwhelmingly in 2004.

I wish I could come to Helena to testify in person for House Bill 311. I hope you will understand that my health conditions make it impossible at this time for me to drive the many hours this would require.

House Bill 311 would improve the lives of patients in three ways:

- 1) **Allow nurse practitioners and select physician assistants to make recommendations for patients in need.** The reason this makes an important improvement is that many Montana patients live in rural communities with no physicians, and they receive their day-to-day healthcare services from physician assistants and nurse practitioners. These healthcare professionals already can diagnose medical conditions and prescribe opiates and other pharmaceuticals, and including them in the medical marijuana program would be no different. It certainly would make it easier for some patients, who otherwise have to drive long distances, to see doctors who aren't familiar with their conditions.
- 2) **Create a registered "transporter" category.** Montana voters want patients in genuine need to have medical marijuana without having to fear arrest by state or local police. This provision of House Bill 311 will help. One of the patients I serve as a caregiver lives on a remote ranch several hours away from my house. That patient's health has declined steadily

over the past year, and she is no longer able to leave home. Meanwhile, I am often not well enough to take the time to drive to see her, so her husband comes to pick up her medicine. When he does that, although the medicine is legal at my house and at the patient's house, the husband has no choice but to break the law during his drive home. The fear he experiences trying to help his wife isn't fair. He doesn't want to break the law at all, but the medical marijuana helps her multiple sclerosis so much that he doesn't really feel like there's any choice. House Bill 311 would solve this problem.

- 3) **Improve the allowable quantities to make the law work as voters intended.** Marijuana is often called "weed," but I can assure you that growing it is not easy. This is why many patients use caregivers, because they are too sick to grow it successfully. About half of the seedlings die, sometimes more than that, before they get even a few inches high. But a marijuana plant won't produce medicine containing THC and the many other needed "cannabinoids" until it reaches maturity, which can take four to six months or longer. And about half the plants that reach maturity turn out to be "male" plants that don't produce the medicine (flowers) at all. This means that the law's current limit of six plants doesn't work for most patients, especially if they have to grow their medicine outdoors, with only one growing season. You could spend all summer working hard, and then end up with only one plant if you're lucky. And under the current law, no matter how much that plant produced, you could only harvest one ounce at a time, in which case the plant will end up dying before you harvest all the medicine you had. The patients I serve need more than one ounce per month in order to control their pain and other suffering. House Bill 311 doesn't solve this problem completely, in my opinion, as it would still require an indoor growing operation for most patients. But allowing more small seedlings that wouldn't count toward the allowable number of plants, and allowing patients and caregivers to have more medicine at a time, would eliminate the problems for most patients.

In closing, I would like to add that it's very important for you to know that people like me are growing small

amounts of marijuana only for patients who are registered legally in the Montana program. There aren't very many of us, as we are people who suffer from serious (usually incurable) health conditions who also have found from hard experience that the usual sorts of drugs don't work at all or don't work nearly as well as medical marijuana does for us. Some of us have doctors who understand the incredible levels of pain we experience, and prescribe large amounts of pain-killers that have dangerous side-effects such as liver damage, and that make it impossible for us to function when taking them. Sometimes they don't really alleviate the pain, but they do make us drool and feel like idiots. In contrast, we find that medical marijuana actually works, and it works well and allows us to still live semi-regular lives. We are not drug dealers and have no interest in breaking the law. That's why House Bill 311 really matters, because it will make the medical marijuana program work well for us, so we don't have to worry about being arrested on top of the health worries we already have all the time.

Please pass House Bill 311. (I would be glad to answer any questions if you want to call me to talk about this.)

Thank-you for your consideration.

Sincerely,

Richard Flor